

# LOBBYIST REGISTRATION

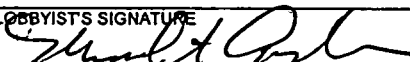
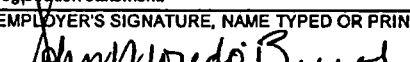
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**L1**

(12/03)

OCT 06 2016

1. Lobbyist Name <b>Michael Groesch</b>		Business Telephone Numbers Permanent (360) 280-7187 Temporary ( ) Cell Phone (360) 280-7187 or Pager	
Permanent Business Address <b>120 State Ave NE #294</b>		E-Mail Address <b>michael.groesch@comcast.net</b>	
City <b>Olympia</b>	State <b>WA</b>	Zip <b>98501</b>	
2. Temporary Thurston County address during legislative session		Employer's occupation, business or description of purpose of organization <b>State agency/museum for historical preservation</b>	
3. Employer's name and address (person or group for which you lobby) <b>The Eastern Washington State Historical Society 2316 W First Avenue, Spokane, WA 99201-5906</b>		E-Mail Address <b>john.moredo-burich@northwestmuseum.org</b>	
4. Name and address of person having custody of accounts, receipts, books or other documents which substantiate lobbyist reports. (Person responsible for producing the annual L3 report) <b>John Moredo-Burich 2316 W First Avenue, Spokane, WA 99201-5906</b>			
5. What is your pay (compensation) for lobbying? \$ <u>3,500.00</u> per <u>Month</u> (hour, day, month, year) Other: Explain:		Description of employment (check one or more boxes) <input type="checkbox"/> Full time employee <input type="checkbox"/> Part time or temporary employee <input checked="" type="checkbox"/> Contractor, retainer or similar agreement <input type="checkbox"/> Unsalaries officer or member of group <input checked="" type="checkbox"/> Sole duty is lobbying Lobbying is only a part of other duties	
6. Are you reimbursed for lobbying expenses? Explain which expenses. <input type="checkbox"/> Yes: \$ _____ per _____ Yes: I am reimbursed for expenses. <input checked="" type="checkbox"/> No: I am not reimbursed for expenses.		Does employer pay any of your lobbying expenses directly? If yes, explain which ones.	
7. How long do you expect to lobby for this organization? Permanent lobbyist <input checked="" type="checkbox"/> Only during legislative session <input type="checkbox"/> Other, Explain:			
8. Is your employer a business or trade association or similar organization which lobbies on behalf of its members? If "yes," attach a list showing the name and address of each member who has paid the association fees, dues or other payments over \$500 during either of the past two years or is expected to pay over \$500 this year. <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. However, no member has paid, pays, or is expected to pay over \$500. Yes. The list is attached			
9. Does your employer have a connected, related or closely affiliated political action committee which will provide funds for you to make political contributions including purchase tickets to fund raising events? If so, list the name of that political action committee. <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Name of the committee is:			
10. If lobbyist is a company, partnership or similar business entity which employs others to perform actual lobbying duties, list name of each person who will lobby. (See WAC 390-20-143 and 144 for instructions.)			

11. Areas of interest. Lobbying is most frequent before legislative committee members or state agencies concerned with following subjects:		Remarks:	
CODE SUBJECT 01 <input type="checkbox"/> Agriculture 02 <input type="checkbox"/> Business and consumer affairs 03 <input type="checkbox"/> Constitutions and elections 04 <input type="checkbox"/> Education 05 <input type="checkbox"/> Energy and utilities 06 <input type="checkbox"/> Environmental affairs - natural resources - parks 07 <input type="checkbox"/> Financial institutions and insurance 08 <input checked="" type="checkbox"/> Fiscal	CODE SUBJECT 09 <input type="checkbox"/> Higher education 10 <input type="checkbox"/> Human services 11 <input type="checkbox"/> Labor 12 <input type="checkbox"/> Law and justice 13 <input type="checkbox"/> Local government 14 <input checked="" type="checkbox"/> State government 15 <input type="checkbox"/> Transportation 16 <input type="checkbox"/> Other - Specify:		
CERTIFICATION: I hereby certify that the above is a true, complete and correct statement.		EMPLOYER'S AUTHORIZATION: Confirming the employment authority to lobby described in this registration statement.	
12. LOBBYIST'S SIGNATURE  DATE <b>10/2/16</b>		EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE  DATE <b>Oct 3, 2016</b>	